

| POSITION                  | INITIALS  | ID NO.       | DATE           |
|---------------------------|-----------|--------------|----------------|
| FEE DETERMINATION         | <i>PH</i> | <i>12492</i> | <i>4/29/00</i> |
| O.I.P.E. CLASSIFIER       |           | <i>KE</i>    | <i>5/11/00</i> |
| FORMALITY REVIEW          | <i>IL</i> | <i>811</i>   | <i>8/10/00</i> |
| RESPONSE FORMALITY REVIEW |           |              |                |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date            |
|----------|-----------------|
| Final    |                 |
| Original |                 |
| 1        | <i>3/6/20</i>   |
| 2        | <i>07/06/03</i> |
| 3        | <i>V V V</i>    |
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| 5        |                 |
| 6        |                 |
| 7        | <i>V V V</i>    |
| 8        | <i>N N</i>      |
| 9        | <i>N N</i>      |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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